Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10765532

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLÁIMS			(Column	20						OR 7		
			W		· · · · · · · · · · · · · · · · · · ·		<u></u>	ATE	FEE	╣	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*		X	9=		OR	X\$18=	
IN	DEPENDENT C	LAIMS	3 m	inus 3 =				13=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							+1	45=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ТО	TAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (C							SM	ALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×\$	9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	PENDENT	CLAIM	=	X4	3=	-	OR	X86=	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+290=	
								OTAL		OR	TOTAL	
ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEE												
_	, ,	CLAIMS		HIGH	EST				ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**	•	= '	X\$	9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X4:	3-	·		X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7,00-	
								5=		OR	+290=	
								FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		= .	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***		=	X43	_			X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	∧00 =	
		+14	5=		OR	+290=						
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is 1 ss than 20, nter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DDIT. FEE	
	r the "Highest Nur he "Highest Num	mber Pr viously Pa ber Previously Paid	id For" IN THIS I For" (Total or	S SPACE is Independ r	less than nt) is the l	3, enter "3." highest number	ADDIT.	_	opriate box			